## **STATEMENT OF**

FORM 1	ORGANIZATION (See instructions)		Office use only
1. NAME OF COMMITTEE (in	(Check if name Examplication is changed) over the	e: If typying, type elines	·
Avery Denniso	n Corporation Employee Political Action C	Committee (ADePAC)	
ADDRESS (number and	treet) 455 Capitol Mall, Suite 801		
(Check if address is changed)			
	Sacramento	CA CA	95814   -
	CITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MA	L ADDRESS (Please provide only one e-mail address	s)	
(Check if address is changed)	feccomm@bmhlaw.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
(Check if address			
is changed)			
2. DATE 0.9	/ 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICA	TION NUMBER C C0046	<b>67340</b>	
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowledge and b	elief it is true, correct and complete	
•	Aablaa Titua	,	
Type or Print Name of	Treasurer Ashlee Titus		
Signature of Treasurer	Electronically Filed by Ashlee Titus		0 9 / 2 2 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	se, erroneous, or incomplete information may subject the p		
Office Use Only	Fe Fe	or further information contact: Ideral Election Commission Il Free 800-424-9530	FEC FORM 1 (Revised 02/2009)